<u> 榮民醫院醫學資源數位化合作網<使用指引></u>

- ◎「榮民醫院醫學資源數位化合作網」(以下簡稱:合作網),為輔導 會、4家榮總、12家榮院及關渡醫院共同採購,僅授權上述單位員 工使用。
- ◎ 首次登入合作網首頁,依畫面指示填寫個人資訊
- 登入帳/密=整合系統(部份員工帳/密,為院內 E-mail)。
- ◎ 路徑:圖書室網頁 <u>http://org.vhyk.gov.tw/lib/Default.aspx</u> 或「高雄 榮總電子資源查詢系統」。
- ◎使用合作網,請依個人需求選用電子資源,並遵守著作權法及相 關規定。



- 《步驟一》:開啟圖書室網站後,於首頁點擊【電子資源】→ • 登入方式一(由高雄榮總圖書館整合系統登入,帳/密=整合系統, 本方式限員工,並可直接院外登入使用)
- 登入方式二(由榮民醫院醫學資源數位化合作網進入,限院內使用)

	開於华閣	EFY具机	距藏旦詞	数世員獻	平臨林住	嗅"自 <i>服伤</i>	昭际口TF	未死ロ日期	
首頁 / 葉院合作網				進	入合作	網網	頁		
↓ 榮院合作網		榮院合作網							
電子資源	>								
榮院館際合作	>								
教育訓練									
數位學習									
認識合作網	>		電子資源		榮院	館際合作		教育訓練	

🖩 電子資源

電子資源

序號	電子資源		備註	使用說明
1	Airiti Library華藝線上圖書館			使用手冊
2	CINAHL Complete護理學期刊全文資料庫	F	?中榮,中榮分院使用	使用手冊
3	CINAHL Plus with Full Text護理學期刊全文資料庫	ß	批,高榮及所屬分院,關渡使用	使用手冊
4	ClinicalKey資料庫	F	骨 (1)選取您想	查詢
5	Cochrane Library 實證醫學資料庫	ſ	助資料類₫	U XYSD
6	Dentistry & Oral Sciences Source(DOSS)牙科與口腔科學全文資料庫	F	批,中榮及所屬分院,關渡使用	使用手冊
7	DynaMed臨床決策輔助與實證醫學評論主題資料庫	F	3北,中,高榮及所屬分院,關渡使用	教學影片
8	ExpertPath病理資料庫	ß	艮北,中,高榮及嘉義(灣橋)使用	資料庫簡介
9	Immunoquery病理資料庫	ß	艮中榮使用	
10	InCites Journal Citation Report (JCR)	ß	艮北,中,高榮及所屬分院,關渡使用	使用手冊 教學影片

EBSCOhost 検索中: CINAHL Plus with Full Text, <u>展示全部</u> 選擇資料庫



K

《步驟三》:(範例:以 nejm 為例,查後畫面如下:

*EBSCOhost	檢索中: CINAHL Plus with Full Text, <u>顯示全部 選擇資料庫</u>				
	new England journal of medicine	還取欄位 (可加選) ▼ 檢索			
	AND -		輸入檢索條	件	
	AND +				
	基本检索 進階檢索 檢察歷史)				
« <u>缩</u> 小檢索結果	检素結果: 1- 50 / 37,533				相關
目前的檢索項目	* 1. Preferences for Peer Support Amongst Fa	amilies Engaged in Paediatri <mark>e Screening Pr</mark>	grammos: The Perspectives of Parente In	welved in Screening for Type 4 Diabetes in	Children Aged 2 12
相似检索: ed 握 客用相關字 也從文章全文內檢索 客用相等主题	(includes abstract) Litchfield, Iar; Quinn, Lauren M Duduction: This work describes a secon support programmes for the newly dia correating programme. A secondary ar support. Results: Parents in 20 of 3 access to more directly interpretable and relevant i clinical care. Conclusions: The needs of peer supp its design both in T1D and other examples of similar guides and the analysis and interpretation of our fir	.; Boardman, Felicity; Boiko, Olga; Naren ran, Parth; Choundhan, Idary analysis of a qualitative data set ori nally used to understar agnosed alongside suggestions for their i corporation into screen <i>r</i> analysis of interviews from participants v no spontaneously raise 33 interviews spontaneously described the potential value of peer information related to the condition; 'Acce sibility and inclusivity' n nort described by parents involved in T1D aediatric screening ap ar population screening programmes. Pat int or Public Contribution ndings.	y, Shivam; Setti, Naga; Sheth, Veer; Greenfield, Sheila M. Heal nd parent participants' preferences for the design and impleme- ing programmes for T1D and a range of other conditions. Meth d preferences for peer support was used to populate a novel fi support if receiving a result indicating a positive (presymptoma elating to access to a community of similar individuals, whether pear to be shared with those of families with children diagnosed on: Patients and the public have been involved throughout the of the public have been involved throughout the of	th Expectations, Aug2024; 27(4): 1-11. (11p) (Journal Article - re- ntation of a screening programme for paediatric Type 1 diabetes I ods: Data were collected from semi-structured interviews conduc amework informed by NHS England's key principles for the sam titic T1D result) from a screening programme. Specifically, the vali- in person or online: 'Person-centred and integrated peer-support 4 with a range of life-altering conditions. Although the needs of pe- design of the ELSA study and have worked with us to inform the s	search, tables/charts) ISSN: 1369-8513 AN: 179280159, 資料章: CINAH Plus with (T1D). From this, their spontaneous preferences for peer support emerged, descrit ted with parents of children aged 3–13 years to explore their expectation, percept e, namely. Shared experiences and reciprocated support, Accessibility a d inclusiv use of 'Shared experiences and reciprocated support' in terms of emotion. I support ' and the need for support reflecting the changing need of the child and he integra er support for paediatric screening may differ across conditions, our find rgs are a tudy process. They contributed to the design and content of patient-facing materia
限制為	主题: Parental Attitudes Evaluation; Health Screen	ing; Diabetes Mellitus, Type 1; Support Goups; Peer Group; Fam	nily; Program Development; Program Implementation; Female;		
□ 全文	Tel HTML 全文 🔼 PDF 全文		「「「「」」「「」」「「」」「」」「「」」「」」「」」「」」「」」「」」「」」	您想要的資訊亚卜	
 □ 有參考資料 □ 同儕評鑑 	2. Population Pharmacokinetic Analysis of So	elumetinib and Its N-desme hyl Metabolite i	n Japanese and Non-Japan	載全文	operable Plexiform Neurofibromas.
目: 至 1982 出版日期 2	E: (includes abstract) Shinbo, Takumi; Higashimori, M Abstract: Background. Selumetinib, a mitogen-acti daily. The objective of this population pharmacokin conducted in Japan and one conducted in the Unit	litsuo; González-Garoía, Ignacio; Learoyc Maria Journal of Clini vated protein kinase kinase 1/2 inhibitor, 1 is been approved in se letic analysis was to evaluate ethnic sens vity in the pharmacokir del States, comprising 12 Japanese partic pants and 88 non-Japa	cal Pharmacy & Therapeutics, 5/14/2024; 20	of pediatric patients with neurofibromatosis type 1 who have sym of pediatric patients with neurofibromatosis type 1 who have sym panese and non-Japanese pediatric patients. Methods. This popu chemes. A two-compartment model with first-order elimination an	、0269-4727 AN: 177355984, 資料庫: CINAHL Plus with Full Text ptomatic, inoperable plexiform neurofibromas at a body surface area (B A)-based lation pharmacokinetic analysis was based on data from 80 pediatric pa ents enro d sequential zero-order and first-order delayed absorption for selumetin , combin
驟示更多	model with first-order elimination for N-desmethyl s investigated covariates, such as race, had a signifi	elumetinib, was used for this analysis. Et nic sensitivity in pharm icant impact. The predicted exposure in Japanese and non-Japan	acokinetics was evaluated by covariate modeling and comparis ese patients showed a considerably overlapping distribution, ar	son of model-predicted exposures. Results. Covariate modeling s nd no clinically relevant difference in exposure was apparent. Cor	howed that BSA had a clinically relevant impact on the pharmacokinetic of selum nclusions. These findings support the use of the same BSA-based dosin regimen
	Japanese pediatric patients with neurofibromatosis	; type 1 and inoperable plexiform neurofic pmas. Subsequent to th	his analysis, selumetinib was approved at the BSA-based dose	of 25 mg/m ² in Japan, which is consistent with the recommended	d dosage and administration in other regions and countries. This analys
進階	師選内谷 rases Pharmacokinetics; Neurofibron	natosis 1 Drug Therapy; Neurofibroma Drug Therapy; Ethnic Gro	ups; Transferases Metabolism; Pediatric Care; Child: 6-12 year	rs; Adolescent: 13-18 years	
 □ 雜誌 (7.366) □ 電子書 (985) □ CEU (778) 	🧯 HTML 全文 🧏 PDF 全文				
□ 總號 (2)	3. The 100 most-cited articles in COVID-19:	a bibliometric analysis.			
● ^{元更多} 主題:主標題 主題 出版商	 (includes abstract) Liew, Yong Y; Dong, Qiming; La Abstract: Corona virus disease 2019 (COVID-19) p two independent reviewers using the 'Web of Soler publications were ranked. These were olded by a to 1 (n = 3). The main subjects were mechanism of a trials or systematic reviews with or without meta-an 	kshman, Nivan; Khajuria, Ankur European Journal of Public Heal andemic, sparked by the emergence of a novel coronavirus in ea nee' database across all available journals up to the year 2023. I stal of 283 034 articles (median citation = 767), median impact fact totion and structures of SARS-CoV-2 virus (n = 18) and impact of nalysis. These findings reflect a growing interest in understanding	Ith, Aug2024; 34(4): 744-752. (9p) (Journal Article - pictorial, ru ruly 2020, has prompted a surge in published articles. This stud Data collected include country, citation count, subject, level of e tor of 68.0 and 72 articles with fundings. China (n = 44), USA (r COVID-19 on public health (n = 18). Publications in 2022 and i the impact of COVID-19 pandemic on public and mental health	esearch, tables/charts) ISSN: 1101-1262 AN: 178839068, 資料意 y aims to systematically analyse the characteristics and trends of vidence (using Oxford Centre for Evidence-Based Medicine Syst n = 19), and UK (n = 13) were the three highest contributors (n = 2023 predominantly focused on the impact of COVID-19. Majority n. This analysis found the potential for future double-blinded rando	CINAHL Plus with Full Text impactful research in the field. The 100 most-cited publications associated with C(em 2011), impact factor, funding, and study design. We identified 394 038 publicati 220 505). Most articles were level 5 evidence (n = 48), followed by level 3 (n = 28 of the highly cited studies were of low-to-moderate quality, with only 10 consisting omized controlled trials to validate existing findings.



實證醫療收集資料 更多 -🧀 資料夾 🛛 偏好設定 語言 🔹 說明 離開 間片 KAOHSIUNG VETERANS IAHL Plus with Full Text, 顯示全部 | 選擇資料庫 GENERAL HOSPITAL 選取欄位(可加選)-檢索 gland journal of medicine 可建立專屬的個人資料夾・它 選取欄位(可加選)▼ 清除 ? 可以協助您儲存、管理您搜尋 到的文獻或影片 選取欄位(可加選) -(+)「 階檢索 檢索歷史 ▶ 檢索結果: 1-50/37,533 相關性 🗸 百面潠項▼ 共享▼ 1. Preferences for Peer Support Amongst Families Engaged in Paediatric Screening Programmes: The Perspectives of Parents Involved in Screening for Type 1 Diabetes in Children Aged 3–13. (includes abstract) Litchfield, Ian; Quinn, Lauren M.; Boardman, Felicity; Boiko, Olga; Narendran, Parth; Choundhary, Shivam; Setti, Naga; Sheth, Veer; Greenfield, Sheila M. Health Expectations, Aug2024; 27(4): 1-11. (11p) (Journal Article - research, tables/charts) ISSN: 1369-6513 AN: 179280159, 資料庫: CINAHL Plus with Full Text Abstract: Introduction: This work describes a secondary analysis of a qualitative data set originally used to understand parent participants' preferences for the design and implementation of a screening programme for 學術期刊 paediatric Type 1 diabetes (T1D). From this, their spontaneous preferences for peer support emerged, described here in the context of existing peer support programmes for the newly diagnosed alongside suggestions for their incorporation into screening programmes for T1D and a range of other conditions. Methods: Data were collected from semi-structured interviews conducted with parents of children aged 3-13 years to explore their expectations, perceptions and preferences of a T1D paediatric screening programme. A secondary analysis of interviews from participants who spontaneously raised preferences for peer support was used to populate a novel framework informed by NHS England's key principles for the same, namely, Shared experiences and reciprocated support, Accessibility and inclusivity and Person-centred and integrated peer support. Results: Parents in 29 of 33 interviews spontaneously described the potential value of peer support if receiving a result indicating a positive (presymptomatic T1D result) from a screening programme. Specifically, the value of 'Shared experiences and reciprocated support' in terms of emotional support and reassurance, and access to more directly interpretable and relevant information related to the condition; 'Accessibility and inclusivity' relating to access to a community of similar individuals, whether in person or online; 'Person-centred and integrated peer-support' and the need for support reflecting the changing need of the child and the integration of peer support with clinical care. Conclusions: The needs of peer support described by parents involved in T1D paediatric screening appear to be shared with those of families with children diagnosed with a range of life-altering conditions. Although the needs of peer support for paediatric screening may differ across conditions, our findings are a valuable starting point for its design both in T1D and other examples of similar population screening programmes. Patient or Public Contribution: Patients and the public have been involved throughout the design of the ELSA study and have worked with us to inform the study process. They contributed to the design and content of patient-facing materials, the content of our topic guides and the analysis and interpretation of our findings. 主題: Parental Attitudes Evaluation; Health Screening; Diabetes Mellitus, Type 1; Support Groups; Peer Group; Family; Program Development; Program Implementation; Female; Male



註:以上僅簡單介紹單一範例,個別資料庫使用方式有所不同。